



BEST PRACTICES

Updates from the Field

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CHALLENGES OF PROVIDING HEALTH SERVICES TO THE URBAN POOR

Background

Taytay, a large, high-income municipality in the Province of Rizal, is situated east of metropolitan Manila. The municipality's five *barangays* (villages), San Juan, Dolores, San Isidro, Sta. Ana, and Muzon, are home to its population of about 200,000, which has grown at an average annual growth rate of 5.8% between 1995 and 2000.

It is estimated that around 40% of Taytay's people live below the poverty line in slums and squatter areas. Most of them, who have come to the metropolis in search of better employment opportunities, hail from the Visayas, Bicol, and Ilocos regions. However, 30% of the children who roam the streets of Taytay are originally from the area.

In 1995, a portion (80 hectares) of Lupang Arenda, a public land spanning 171 hectares, was declared a resettlement site through a presidential proclamation. Per the proclamation, 50 hectares will be allocated to relocate squatters from other parts of Metro Manila, while 30 will be for Taytay's use. So far, some 10,000 squatter families already occupy about 100 hectares.

The National Housing Authority was responsible for coordinating the development of Lupang Arenda, since it is a



resettlement site. However, the development of the area as a resettlement site was abandoned when it was estimated that around PHP1 billion (US\$20 million) would be needed just for landfill to increase its elevation and thus minimize flooding. Because it is flat and built up, Taytay is susceptible to flash flooding after heavy downpours. Floodwaters rise to half a meter on average and sometimes exceed a meter.

Unfortunately, squatters from all over Metro Manila have already started to settle in Lupang Arenda, and with this settlement have come all kinds of socioeconomic and environmental problems typical of all squatter sites. Without the National Housing Authority to orchestrate its development, Lupang Arenda became just another slum without basic services and amenities.

The Response

While it has no authority over the resettlement site, the municipal government took it upon itself to make health services available to the people of Lupang Arenda and to the squatters who have settled along the Manggahan floodway since the early 1980s, in addition to its legal constituents.

Until recently, the fastest way to reach Lupang Arenda was by canoe, since it lies across the river. Otherwise, people had to take a longer land route. The place is under water for most of the year, making it more difficult for health workers to enter the area to provide basic health services on a regular basis. Floodwaters also discourage the people from visiting the health center at San Lorenzo Ruiz, a nearby resettlement



MATCHING GRANT PROGRAM
Department of Health

site where former President Estrada relocated the squatters from his hometown. Health services, therefore, reached the residents of Lupang Arenda primarily through medical missions and special outreach activities organized by the Municipal Health Office.

The participation of Taytay in the Matching Grant Program (MGP) of the Department of Health in 1999 paved the way for the Municipal Health Office to expand its services. With the MGP's focus on disadvantaged populations and considering the large number of families in Lupang Arenda whose basic health needs have to be met, the municipal government deemed it prudent to use the additional resources to improve the health conditions of women and children in this area.

The MGP funds have been used primarily to conduct a house-to-house survey in the area to determine women and children with unmet needs for health services such as family planning, immunization, and vitamin A supplementation. A section of the multipurpose hall was subsequently converted into a health station. The Municipal Health Office also assigned a midwife to the health station to ensure that the immediate health needs of the community are met. The municipal government still organizes occasional medical missions to the area. On-site services are usually provided in the multipurpose hall.

A portion of the MGP funds was also used to purchase drugs and medicines. Medical supplies and equipment were likewise procured for the Rural Health Unit that is now being constructed in the heart of Lupang Arenda. This will eventually become the main health center, which will cater to the residents of both Lupang Arenda and San Lorenzo Ruiz. The Rural Health Unit,

which is part of the municipal government's financial contribution to the MGP, will have a full staff, consisting of a doctor, nurse, midwife, dentist, and nursing aide. The Municipal Health Office decided to locate the Rural Health Unit in Lupang Arenda to make essential health services more accessible to a greater majority of its urban poor. This move is intended to increase the utilization of health services by this group, who are often discouraged from doing so due to their difficult situation.

The Future

The municipal government realizes that it takes more than health interventions to improve health conditions in Lupang Arenda. There has to be a clear development plan for the area that incorporates a comprehensive package of basic services aimed to uplift the people's living condition. This will only materialize if the resettlement area is officially turned over to the municipal government. Only then will the municipality be able to invest its resources in the economic and social development of Lupang Arenda. For its part, the Municipal Health Office is already taking steps to incorporate the requirements of the area into the local health plan to ensure continued provision of health services.

The Municipal Health Office is likewise in the process of recruiting and training additional Barangay Health Workers (BHWs). At present, only 12 BHWs from the area are available to provide primary health services, do the house-to-house survey, and update the family profiles for the Community-Based Monitoring and Information System. It is worth noting that as a result of the focus given to Lupang Arenda by the Municipal Health Office, the number of 9-11 month old children having incomplete or no vaccination significantly decreased, from

103 to 53 during the period of January to September 2001. More pregnant women had tetanus toxoid immunization, reducing the number (from 85 to 28) of those without vaccination or with only one tetanus toxoid shot. The level of unmet need for family planning among women of reproductive age declined from 325 to 304 during the same period.

A municipal-owned emergency hospital also opened recently. The only government hospital in Taytay, the facility will include a labor room, delivery room, and voluntary sterilization complex as part of the municipality's commitment to sustain the gains achieved under the Matching Grant Program. All women who will deliver their babies in the emergency hospital will be given at least two tetanus toxoid shots to protect future pregnancies, while the newborns will be followed up for their required immunizations. Mothers who choose to be sterilized will immediately be scheduled for operation, while others will be referred to their respective health centers for other family planning methods.

Taytay's plans for its constituents include the deployment of a service vehicle for medical emergencies, particularly in hard-to-reach areas such as Lupang Arenda, the use of mobile television for community teaching, and providing tetanus toxoid immunization (first shot) to women during premarital counseling sessions.

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